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PTO/SB/81 (10-00)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/807,506
Filing Date	April 13, 2001
First Named Inventor	Marta BLUMENMFELD, et al.
Group Art Unit	Unknown
Examiner Name	Unassigned
Attorney Docket Number	50.US3.PCT

I hereby appoint:

☐ Practitioners at Customer Number

000027206

Place Customer
Number Bar Code
Label here

☒ Practitioner(s) named below:

Name	Registration Number
John M. Lucas	43,373
Peter Follette	46,213
Lukas R. Voellmy	43,358

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

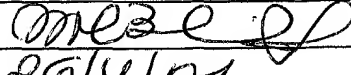
<input checked="" type="checkbox"/> Firm or Individual Name	John Lucas, Ph.D., J.D.				
Address	Genset Corporation				
Address	10665 Sorrento Valley Road				
City	San Diego	State	CA	Zip	92121-1609
Country	USA				
Telephone	(858) 597-2600	Fax	(848) 597-2601		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Marta Blumenfeld
Signature	
Date	26/4/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label 000027206 OR ☒ Correspondence address below

Name John Lucas, Ph.D., J.D.

Address Genset Corporation

Address 10665 Sorrento Valley Road

City San Diego State CA ZIP 92121-1609

Country USA Telephone 858/597-2600 Fax 858/597-2601

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Marta

Family Name or Surname BLUMENFELD

Inventor's Signature

Marta Blumenfeld

Date

26/4/01

Residence: City Paris State Country France Citizenship French

Mailing Address 24 rue Royale

Mailing Address

City Paris State ZIP 75008 Country France

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Lydie

Family Name or Surname BOUGUELERET

Inventor's Signature

Date

Residence: City Petit Lancy State Switzerland Country Citizenship French

Mailing Address 24 rue Royale

Mailing Address

City Paris State ZIP 75008 Country France

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

09207506-030601

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Country **USA** Telephone **858/597-2600** Fax **858/597-2601**

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NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name **Marta** Family Name **BLUMENFELD**
(first and middle [if any]) (or Surname)

Inventor's Signature _____ Date _____
Residence: City **Paris** State _____ Country **France** Citizenship **French**

Mailing Address **24 rue Royale**

Mailing Address _____
City **Paris** State _____ ZIP **75008** Country **France**

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name **Lydie** Family Name **BOUGUELERET**
(first and middle [if any]) (or Surname)

Inventor's Signature *[Signature]* Date **26.04.01**
Residence: City **Petit Lancy** State _____ Country **Switzerland** Citizenship **French**

Mailing Address **24 rue Royale**

Mailing Address _____
City **Paris** State _____ ZIP **75008** Country **France**

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

000027206-000001

2a

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PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page ___ of ___

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ilya		CHUMAKOV	
Inventor's Signature		Date	
		24.04.01	
Residence: City	Vaux-le-Penil	State	Country
			France FAX
Mailing Address		Citizenship	
24 rue Royale		French	
Mailing Address			
City	Paris	State	ZIP
			75008
Country		France	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Daniel		COHEN	
Inventor's Signature		Date	
Residence: City	Neuilly-sur-Seine	State	Country
			France
Mailing Address		Citizenship	
24 rue Royale		French	
Mailing Address			
City	Paris	State	ZIP
			75008
Country		France	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Laurent		ESSIOUX	
Inventor's Signature		Date	
Residence: City	Paris	State	Country
			France
Mailing Address		Citizenship	
24 rue Royale		French	
Mailing Address			
City	Paris	State	ZIP
			75008
Country		France	

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Given Name (first and middle [if any])

Family Name or Surname

Ilya

CHUMAKOV

Inventor's
Signature

Date

Residence: City Vaux-le-Penil

State

Country France

Citizenship French

Mailing Address 24 rue Royale

Mailing Address

City Paris

State

ZIP 75008

Country France

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Daniel

COHEN

Inventor's
Signature

Date

04/27/01

Residence: City Neuilly-sur-Seine

State

Country France

Citizenship French

Mailing Address 24 rue Royale

Mailing Address

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Country France

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Given Name (first and middle [if any])		Family Name or Surname	
Ilya		CHUMAKOV	
Inventor's Signature		Date	
Residence: City	Vaux-le-Penil	State	Country France
Mailing Address		Citizenship French	
24 rue Royale			
Mailing Address			
City	Paris	State	ZIP 75008
		Country France	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Daniel		COHEN	
Inventor's Signature		Date	
Residence: City	Neuilly-sur-Seine	State	Country France
Mailing Address		Citizenship French	
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Mailing Address			
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Given Name (first and middle [if any])		Family Name or Surname	
Laurent		ESSIQUX	
Inventor's Signature		Date	
Residence: City	Paris	State	Country France
Mailing Address		Citizenship French	
24 rue Royale			
Mailing Address			
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing
OR
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 50.US3.PCT

First Named Inventor Marta BLUMENFELD, et al.

COMPLETE IF KNOWN

Application Number 09 / 807,506

Filing Date April 13, 2001

Group Art Unit unknown

Examiner Name unassigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Genes, Proteins and Biallelic Markers Related to Central Nervous System Disease

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) April 13, 2001

as United States Application Number or PCT International

Application Number 09/807,506 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
PCT/IB99/01730	WIPO	10/12/1999	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page ____ of ____

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Ilya

CHUMAKOV

Inventor's
Signature

Date

Residence: City Vaux-le-Penil

State

Country France

Citizenship French

Mailing Address 24 rue Royale

Mailing Address

City Paris

State

ZIP 75008

Country France

Name of Additional Joint Inventor, if any:

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Given Name (first and middle [if any])

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Daniel

COHEN

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ESSIOUX

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**DECLARATION FOR UTILITY OR
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PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing
OR
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Attorney Docket Number	50.US3.PCT
First Named Inventor	Marta BLUMENFELD, et al.
COMPLETE IF KNOWN	
Application Number	09 / 807,506
Filing Date	April 13, 2001
Group Art Unit	unknown
Examiner Name	unassigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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Given Name (first and middle [if any])

Family Name or Surname

Ilya

CHUMAKOV

Inventor's
Signature

Date

Residence: City Vaux-le-Penil

State

Country France

Citizenship French

Mailing Address 24 rue Royale

Mailing Address

City Paris

State

ZIP 75008

Country France

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Given Name (first and middle [if any])

Family Name or Surname

Daniel

COHEN

Inventor's
Signature

Date

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State

Country France

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Laurent

ESSIOUX

Inventor's
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Residence: City Paris

State

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	50.US3.PCT
	First Named Inventor	Marta BLUMENFELD, et al.
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PTO/SB/01 (10-00)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label ☐ 000027206 OR ☒ Correspondence address below

Name John Lucas, Ph.D., J.D.

Address Genset Corporation

Address 10665 Sorrento Valley Road

City San Diego State CA ZIP 92121-1609

Country USA Telephone 858/597-2600 Fax 858/597-2601

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name Marta
(first and middle [if any])

Family Name BLUMENFELD
or Surname

Inventor's
Signature

Date

Residence: City Paris State Country France Citizenship French

Mailing Address 24 rue Royale

Mailing Address

City Paris State ZIP 75008 Country France

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name Lydie
(first and middle [if any])

Family Name BOUGUELERET
or Surname

Inventor's
Signature

Date

Residence: City Petit Lancy State Switzerland Country Citizenship French

Mailing Address 24 rue Royale

Mailing Address

City Paris State ZIP 75008 Country France

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → ☐

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	50.US3.PCT
	First Named Inventor	Marta BLUMENFELD, et al.
	COMPLETE IF KNOWN	
	Application Number	09 / 807,506
	Filing Date	April 13, 2001
	Group Art Unit	unknown
	Examiner Name	unassigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Genes, Proteins and Biallelic Markers Related to Central Nervous System Disease

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

April 13, 2001

as United States Application Number or PCT International

(if applicable).

Application Number

09/807,506

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
PCT/IB99/01730	WIPO	10/12/1999	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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☐ A petition has been filed for this unsigned inventor

Given Name Marta
(first and middle [if any])

Family Name BLUMENFELD
or Surname

Inventor's
Signature

Date

Residence: City Paris

State

Country France

Citizenship French

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Mailing Address

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State

ZIP 75008

Country France

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Address 10665 Sorrento Valley Road

City San Diego State CA ZIP 92121-1609

Country USA Telephone 858/597-2600 Fax 858/597-2601

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Given Name (first and middle [if any]) Marta Family Name or Surname BLUMENFELD

Inventor's Signature Date
Residence: City Paris State Country France Citizenship French

Mailing Address 24 rue Royale

Mailing Address
City Paris State ZIP 75008 Country France

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Lydie Family Name or Surname BOUGUELERET

Inventor's Signature Date
Residence: City Petit Lancy State Switzerland Country Citizenship French

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Mailing Address
City Paris State ZIP 75008 Country France

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09807506-080601

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/807,506
Filing Date	April 13, 2001
First Named Inventor	Marta BLUMENFELD, et al.
Group Art Unit	Unknown
Examiner Name	Unassigned
Attorney Docket Number	50.US3.PCT

I hereby appoint:

☐ Practitioners at Customer Number

000027206

Place Customer
Number Bar Code
Label here

OR

☒ Practitioner(s) named below:

Name	Registration Number
John M. Lucas	43,373
Peter Follette	46,213
Lukas R. Voellmy	43,358

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Country USA

Telephone (858) 597-2600

Fax (848) 597-2601

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Lydie Bougueleret

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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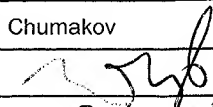
<input checked="" type="checkbox"/> Firm or Individual Name	John Lucas, Ph.D., J.D.				
Address	Genset Corporation				
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Name	Ilya Chumakov
Signature	
Date	24 04 01

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SIGNATURE of Applicant or Assignee of Record

Name Daniel Cohen

Signature

Date

04/27/01

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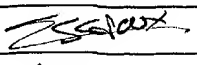
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Name	Laurent Essioux
Signature	
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